

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	smc		5/5/00
O.I.P.E. CLASSIFIER		15	5/10/00
FORMALITY REVIEW	HL	526	6/29/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 -+ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓		6-1-00
2			7-12-00
3			10-2-00
4			6-20-00
5			12-29-00
6			9-17-00
7			
8		N N N X X	
9	X	N N N	
10		N N N	
11		N N N	
12		N N N	
13		N N N	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17		N N N X X	
18		N N N X X	
19		N N N X X	
20		N N N X X	
21	✓	✓	
22	✓	✓	
23	X	X X X	
24	✓	✓	
25	✓	✓	
26	X	X X X	
27	✓	✓	
28		N N N	
29	✓	✓	
30		N N N	
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If more than 150 claims or 10 actions
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